

# People with learning disabilities as offenders or alleged offenders in the UK criminal justice system

Glynis Murphy MSc PhD<sup>1</sup> Isabel C H Clare MPhil<sup>2</sup>

*J R Soc Med* 1998;91:178-182

The past twenty years have witnessed a sea change in services for people with learning disabilities, attributable at least in part to an increasing recognition that such individuals have a right to participate as full citizens in the life of the community<sup>1</sup>. With this move towards 'ordinary life'<sup>2</sup> we need to ensure that people with learning disabilities are treated properly in the criminal justice system, both as victims of crime<sup>3,4</sup> and as suspects. Here we review the way suspects with learning disabilities are dealt with in the UK.

## PREVALENCE

In the early years of this century, numerous studies indicated that rates of offending were much higher among people with learning disabilities than in the general population and some startling assertions were made about people with learning disabilities as a result:

There is no investigator who denies the fearful role played by mental deficiency in the production of vice, crime and delinquency... not all criminals are feeble-minded but all feeble-minded are at least potential criminals (Terman, 1916, quoted in Craft<sup>5</sup>).

On later examination, many of the findings of these early studies proved to have arisen from poor methodology<sup>6,7</sup>—inappropriate tests, samples or norms.

Nevertheless, until recently, when people with a learning disability were alleged to have committed a crime, they could be incarcerated in hospital, sometimes for many years, without a proper trial of the facts of the case (for example, if they were deemed unfit to plead<sup>8</sup> or if they were detained in hospital under a section of the Mental Health Act without going through the criminal courts). Nowadays, with the closure of hospitals and the drive towards community care, there is clear guidance that this should not be tolerated and two government reports<sup>9,10</sup> have recommended that, wherever possible, people with learning disabilities should not be institutionalized, even if

they have been convicted of a crime, and that they should receive non-custodial sentences unless hospital admission or imprisonment is strictly necessary.

Since 1970, in the UK and elsewhere, there have been attempts to tap different parts of the criminal justice system, including police stations, magistrate courts and prisons, to establish how many people with learning disabilities appear at the various stages<sup>11-21</sup>. Despite different methodologies, all the English prison studies have demonstrated that only 1% (or fewer) of remanded or convicted prisoners have an intellectual disability, in contrast to the much larger numbers of prisoners with mental disorders of other kinds<sup>11,12,15,17,18</sup>. This 1% estimate seems to be lower than figures elsewhere: for example, in Australia about 2% of the prison population (and up to 10% of the people in some prisons) have intellectual disabilities<sup>16</sup>. Likewise in the USA the general view is that some 2% of those in prison have what is termed there 'mental retardation'<sup>7</sup>, although higher figures were obtained in some studies<sup>20</sup>.

At earlier stages in the criminal justice system the proportion of people with learning disabilities seems to be higher. Studies in two London police stations<sup>13</sup> and one in Cambridge<sup>14</sup> indicate that between 5% and 8% of those detained at police stations for questioning have an intellectual disability (though formal testing of IQ was used only in the London research and neither study assessed social functioning). A follow-up of the people with probable learning disabilities in the Cambridge study suggested that, if anything, proportionately more of the people with learning disabilities went on to appear at court than did those without a disability<sup>19</sup>. The small numbers of those with a disability in the Cambridge study, however, make it difficult to draw conclusions with respect to the disposals in court. Probably many people with learning disabilities, even when they get as far as the police station, are either diverted in (or before) court<sup>21-26</sup> or receive non-custodial sentences—otherwise the proportion in prison would be higher.

In Scotland, since 1983/4, the procurators fiscal (state prosecutors) have been able to refer people arrested by the police, if the police think they are 'disturbed', for psychological or psychiatric assessment and/or treatment

<sup>1</sup>Tizard Centre, University of Kent, Canterbury, Kent CT2 7LZ; <sup>2</sup>Section of Developmental Psychiatry, University of Cambridge, Douglas House, Trumpington Road, Cambridge CB2 2AH, UK

Correspondence to: Glynis Murphy

before prosecution. According to Cooke<sup>21</sup>, in his consecutive cohort of 150 people so referred a high proportion of suspects showed anxiety or depression, with smaller numbers diagnosed as having schizophrenia and none as having learning disabilities. In England and Wales, diversion from custody has also been possible for some time, by several different routes<sup>22</sup>, but court diversion schemes are of more recent origin. At least in part, they are intended to prevent mentally disordered people from being sent to prison unnecessarily, in line with the Home Office circulars such as HOC 12/95<sup>23</sup>. The schemes vary considerably<sup>24</sup>, sometimes involving only psychiatrists, based in magistrate courts, who may take referrals from solicitors, probation officers, social workers, prison medical staff and the magistrates themselves<sup>25</sup>, sometimes involving a multidisciplinary team of community psychiatric nurse, social worker and probation officer, based in police stations and courts<sup>26</sup>. However they operate, referrals to court diversion schemes tend to include a high proportion of homeless people and high percentages of people with a previous psychiatric history and/or current psychiatric diagnosis<sup>25</sup>. Few people referred to court diversion schemes seem to have learning disabilities (2% in one London study<sup>25</sup>), although this cannot be taken to mean that a similar proportion of people with learning disabilities appear in court, since not all those appearing in court are referred. In contrast, Hayes, who assessed *all* those people who were over 18 years of age who were appearing in four local courts in New South Wales, found that about 14% had intellectual disabilities<sup>27</sup>. However, overrepresentation of ethnic minorities in the sample may signify that some people's difficulties were culture or language related.

### VULNERABILITIES OF SUSPECTS IN THE CRIMINAL JUSTICE SYSTEM

People with learning disabilities have vulnerabilities that can affect the outcome of their cases and alter the likelihood of benefit from the due process of the law. Some of the vulnerabilities apply also to victims of crime but here we focus on suspects. People with learning disabilities are very likely to have deficits in communication, memory and problem solving<sup>28</sup>, all of which carry implications for interviewing and all of which vary considerably across the very wide range of ability. In relation to communication, for example, a police officer may be faced by someone whose understanding and expression of language is extremely poor or by someone whose best means of communication is through signing or someone who *appears* to be understanding what is said since s/he replies in similar terms but who is simply echolalic. Perhaps most importantly, people with a learning disability are also likely to be suggestible and acquiescent if they do not understand

what is being asked<sup>29</sup> and this is especially the case when they perceive themselves as being powerless, as they may well do in a police station.

Suggestibility has been assessed in a legal context by Clare and Gudjonsson<sup>30</sup>, using the Gudjonsson Suggestibility Scale (GSS). They showed that people with learning disabilities, on average, were both less able to recall a passage of verbally presented material and very much more likely to yield to leading questions about the material than people without learning disabilities. As a group, they did not seem particularly liable to shift their answers under interrogative pressure. In addition, both this and other studies have shown that people with learning disabilities are more likely to be acquiescent and to confabulate than people without learning disabilities<sup>30</sup>, so that suspects with learning disabilities must be interviewed with extreme care. There is now some guidance on how this might best be achieved, at least for *victims* with learning disabilities<sup>31</sup>.

These difficulties with suggestibility, acquiescence and confabulation mean that people with learning disabilities, when not carefully interviewed, may seem to 'change their stories' in police stations and court rooms. In addition, suspects with learning disabilities may fail to understand their rights, with major implications for the eventual outcome.

In England and Wales, according to the Police and Criminal Evidence Act 1984 (PACE) and the accompanying codes of practice<sup>32</sup>, anyone brought to a police station for questioning must first be cautioned and must also be informed he or she has three basic rights—to have someone informed of their arrest, to have legal advice and to consult the codes of practice. These rights do not have to be exercised immediately. Thereafter, detainees must be given the Notice to Detained Persons, which reiterates these rights, notifies the suspect that he or she may also obtain a copy of the custody record (the complete record of his/her detention) and repeats the caution.

For people with learning disabilities, who may have poor comprehension and poor literacy skills, important issues include whether they understand the caution, whether they tell police they are unable to read the Notice to Detained Persons and whether, if the Notice is read to them, they can understand the content of it. Gudjonsson and Clare have examined these issues in a series of studies<sup>33–35</sup> and also piloted an experimental revised Notice with simplified wording<sup>36</sup>.

With respect to the caution, people with learning disabilities had difficulty understanding even the pre-1994 version, despite its relative simplicity<sup>33</sup>. However, the modification of the right to silence under section 34 of the Criminal Justice and Public Order Act 1994 (England and Wales), resulted in a new and more complex 37-word caution:

You do not have to say anything. But it may harm your defence if you do not mention when questioned something which you later rely on in court. Anything you do say may be given in evidence.

When this new caution was presented in its entirety, as it would normally be, Clare *et al.*<sup>34</sup> found that very few people could adequately explain all three sentences (only 8% of A-level students, only 7% of a group of ordinary people with IQs in the normal range and only 48% of police officers could do this). The middle sentence seemed particularly difficult (only 18% of A level students and 7% of the ordinary population group were able to explain this sentence on its own). Presumably, even fewer people with learning disabilities will be able to comprehend the new caution.

With respect to understanding their legal rights as described in the Notice to Detained Persons, Clare and Gudjonsson<sup>33</sup> found that many people with learning disabilities did not understand that they had a right to legal advice and/or a right to have someone informed of their whereabouts, *even* when the Notice was read out to them (the police are not obliged to read out the Notice). The revised (1991) version of the Notice appeared no better: only 68% of the sentences were fully understood by people in the normal range for ability, while people with intellectual disabilities understood only 11% of sentences<sup>35,37</sup>.

Subsequently, Clare and Gudjonsson<sup>36</sup> devised an experimental version of the Notice which simplified the information on the caution and rights, and somewhat altered the way in which the information was presented. In addition some questions were inserted which were intended to assist people with learning disabilities in identifying themselves at the police station, since it appeared that few vulnerable people were currently identifying themselves (see below). Clare and Gudjonsson demonstrated that the experimental Notice did indeed simplify the information, judging by Flesch scores, did improve people's understanding of the Notice (71% of sentences on average were understood by the mixed IQ groups, compared to 59% of the sentences on the original 1986 version and 41% of the revised 1991 version) and the verbal questions provided did seem to result in about 80% of vulnerable people identifying themselves to the police. Nevertheless, the experimental Notice has not been adopted by the Home Office.

A further disadvantage for suspects with learning disabilities in the criminal justice system is their increased likelihood of difficulties in decision-making. Clare and Gudjonsson<sup>37</sup> showed a fictional film of a man confessing to a crime of murder (which he had not committed) to 41 people, 21 of whom had intellectual disabilities and 20 of whom did not. Participants were asked several factual questions about the film (to check that they understood the

scenario) and were then asked about the consequences of the man's (false) confession to a murder. More than a third of the people with learning disabilities thought the man would be allowed home until the trial and would not have to go to prison (though they realized he would have to appear in court at a later date). Moreover, nearly a quarter of those with learning disabilities thought the detective in the film would believe the suspect if he later retracted his confession to the murder (cf 5% of the non-disabled group). This is, of course, a particularly dangerous belief which may arise from a misplaced trust in the processes of the criminal justice system amongst those with learning disabilities.

Finally, there is the issue of false confessions. The vulnerability of suspects with learning disabilities to giving false confessions was recognized some time ago, following several notorious cases of miscarriage of justice in the 1950s, 1960s and 1970s<sup>38</sup>. This led to special provisions in the Police and Criminal Evidence Act 1984, designed to protect vulnerable people. This Act and the accompanying codes of practice<sup>32</sup> require, for example, that in the police station people with learning disabilities must be interviewed with an 'appropriate adult' present and, where interviews take place without an appropriate adult, confession evidence may be ruled inadmissible in court. The London police station studies<sup>13</sup> suggested that 20% of the people detained for questioning fulfilled the criteria for an appropriate adult (some for reasons other than learning disabilities) but only 4% were so identified by the police.

The appropriate adult's role in the police station was envisaged as a protection against the tendency of 'vulnerable' suspects to 'provide information which is unreliable, misleading or self-incriminating'<sup>32</sup>. To provide such protection, there are presumably at least two minimum requirements—first, that the police should recognize suspects' vulnerability (and provide appropriate adults accordingly) and secondly that the appropriate adults themselves should act to alert the police during the interview if they feel that the 'vulnerable' suspect is not understanding the questions and/or is answering the questions in a way that is acquiescent or suggestible. However, in a major study of the provision and role of appropriate adults, Bean and Nemitz<sup>39</sup> showed that only 0.2% of suspects (38 of the 19 472 cases) in the four police stations surveyed obtained an appropriate adult, and other studies have reported similar results (1% in Brown *et al.*<sup>40</sup> and 0.4% in Robertson *et al.*<sup>41</sup>). Even more worryingly, it seems that few appropriate adults actually speak during police interviews and, when they do speak, they are sometimes not acting to protect the suspect at all<sup>42</sup>. As a consequence there have been calls for a review of the role, selection and training of appropriate adults for vulnerable suspects, including those with learning disabilities<sup>42</sup>.

## SERVICE DEVELOPMENTS FOR SUSPECTS

There is a growing feeling that an overprotective 'they couldn't help it' attitude to people with learning disabilities who commit crimes is unhelpful to perpetrators (and their victims). At least some of the normal social consequences of breaking the law need to impinge on people with learning disabilities because of the likely social learning that may follow. Nevertheless, those involved in learning disability services do not wish to see this right to 'due process' result in antitherapeutic consequences for those with learning disabilities. Action may need to be taken at several points in the criminal justice system to prevent injustice and to improve the outcome for people with learning disabilities. This is likely to involve empowering people with learning disabilities to understand the system (for example, by providing them with information about the process in a form which they can understand<sup>43,44</sup>), establishing good special provisions (such as a properly effective appropriate adult system) and ensuring that police, probation officers, social workers and health professionals work together to provide a seamless service with compatible goals<sup>23,45</sup>.

It is clear that some people with learning disabilities suffer disadvantages in the police station as suspects, including not being able to read or understand the Notice to Detained Persons (and the caution) to the same extent as others, not always obtaining the support to which they have a right, such as an appropriate adult and/or a solicitor during interrogation, and not being aware of some of the possible consequences of some of their actions. One of the difficulties, however, for those trying to improve services for people with learning disabilities in the criminal justice system is how to determine when a particular individual is disabled. In one of Clare and Gudjonsson's studies of the understanding of Notice to Detained Persons only 35% of the people using services for those with learning disabilities clearly understood the need to inform police of their disability<sup>33</sup>. Other studies have shown that it is difficult for the police to recognize when a person has a learning disability, so that special protection for vulnerable people under the Police and Criminal Evidence Act, for example, then may not be implemented. One possible solution is to develop a standardized way in which all suspects would be screened by police, so that people with learning disabilities are identified and provided with the necessary safeguards. One way of doing this is currently being piloted in the Metropolitan police force (Clare ICH, Murphy G, Gudjonsson GH, unpublished). The task is likely to be difficult, since early studies showed that some of the people who declare themselves to have a learning disability on questioning do not have such a disability (Murphy *et al.*<sup>15</sup> in their prison study found that no one screened positive by

this question technically had a disability), while others who do have a disability do not declare themselves<sup>36</sup>.

With respect to the consequences of police interviewing and charging, the difficulties people with learning disabilities experience in prison<sup>46</sup> make custody a very poor option, either at the remand stage or after conviction. Apparently this is now well recognized since few people with learning disabilities are to be found in UK prisons. Diversion from custody should result in better services for those with learning disabilities, although by no means all learning disability teams have good links with diversion schemes. Even where people have been diverted from custody, if they then languish in hospital wards without proper treatment this is probably little better than custody, especially if the only treatment offered is medication to control behaviour, in the absence of a diagnosed mental illness. There is no shortage of possible treatment techniques of relevance to people with learning disabilities who have offended (for example, anger management training, social skills training, desensitization, covert sensitization, group therapy)<sup>47,48</sup>, and most professionals agree these are the interventions of choice, although few of the techniques have been thoroughly evaluated for people with learning disabilities. However, not all community-based learning disability teams are able to offer such treatments and in some areas no service of any kind may be offered to those with mild learning disabilities, on the grounds that eligibility criteria exclude them.

Commissioners of services ought to consider what constitutes a good service for this numerically small but complex group. There seems a growing tendency, as hospitals for people with learning disabilities close, for health authorities to commission secure or semi-secure units to provide hospital treatment for people with learning disabilities who are at risk of offending. Though such units may be successful in the short term<sup>49,50</sup>, they will be of little benefit in the long term unless linked with careful provision for subsequent residential and day care<sup>51,52</sup>. What is needed, as the Mansell report proposed<sup>10</sup>, is competent local services able to provide individual care programmes for individual needs.

## REFERENCES

- 1 Emerson E. What is normalisation? In: Brown H, Smith H, eds *Normalisation: A Reader for the Nineties*. London: Routledge, 1992:1-18
- 2 King's Fund Centre. *An Ordinary Life: Comprehensive Locally-based Residential Services for Mentally Handicapped People*. London: King's Fund Centre, 1980
- 3 Williams C. *Invisible Victims: Crime and Abuse against People with Learning Difficulties*. London: Jessica Kingsley, 1995
- 4 Sanders A, Creaton J, Bird S, Weber L. *Victims with Learning Disabilities: Negotiating the Criminal Justice System*, Occasional Paper No. 17. Oxford: Centre for Criminological Research, University of Oxford, 1997

- 5 Craft M. Low intelligence, mental handicap and criminality. In: Craft M, Craft A, eds. *Mentally Abnormal Offenders*. London: Baillière-Tindall, 1984:177-85
- 6 Woodward M. The role of low intelligence in delinquency. *Br J Delinquency* 1955;5:281-303
- 7 Noble J, Conley RW. Toward an epidemiology of relevant attributes. In: Conley RW, Luckasson R, Bouthilet GN, eds. *The Criminal Justice System and Mental Retardation*. Baltimore: Paul H Brookes, 1992:17-53
- 8 Grubin DH. Unfit to plead in England and Wales 1976-1988, a survey. *Br J Psychiatry* 1991;158:540-8
- 9 Department of Health. *Review of Health and Social Services for Mentally Disordered Offenders and Others Requiring Similar Services* (Chairman Dr J Reed). London: HMSO, 1992
- 10 Department of Health. *Services for People with Learning Disabilities and Challenging Behaviour or Mental Health Needs* (Chairman Professor Jim Mansell). London: HMSO, 1993
- 11 Coid J. Mentally abnormal prisoners on remand—rejected or accepted by the NHS. *BMJ* 1988;296:1979-82
- 12 Gunn J, Maden A, Swinton M. Treatment needs of prisoners with psychiatric disorders. *BMJ* 1991;303:338-41
- 13 Gudjonsson GH, Clare ICH, Rutter S, Pearse J. *Persons at Risk During Interviews in Police Custody: The Identification of Vulnerabilities*, Royal Commission of Criminal Justice, Research Study No. 12. London: HMSO, 1993
- 14 Lyall I, Holland AJ, Collins S, Styles P. Incidence of persons with a learning disability detained in police custody: A needs assessment for service development. *Med Sci Law* 1995;35:61-71
- 15 Murphy G, Harnett H, Holland AJ. A survey of intellectual disabilities amongst men on remand in prison. *Ment Handicap Res* 1995;8:81-98
- 16 Hayes S. Recent research on offenders with learning disabilities. *Tizard Learning Disability Rev* 1996;1:7-15
- 17 Brooke D, Taylor C, Gunn J, Maden A. Point prevalence of mental disorder in unconvicted male prisoners in England and Wales. *BMJ* 1996;313:1524-7
- 18 Birmingham L, Mason D, Grubin D. Prevalence of mental disorder in remand prisoners: consecutive case study. *BMJ* 1996;313:1521-4
- 19 Lyall I, Holland AJ, Collins S. Offending by adults with learning disabilities: identifying need in one health district. *Ment Handicap Res* 1995;8:99-109
- 20 Brown BS, Courtless TF. *The Mentally Retarded Offender*. Department of Health Education & Welfare Publication No. 72-90-39 Washington DC: US Government Printing Office, 1971
- 21 Cooke DJ. Treatment as an alternative to prosecution: offenders diverted for treatment. *Br J Psychiatry* 1991;158:785-91
- 22 Fennell P. Diversion of mentally disordered offenders from custody. *Criminal Law Rev* 1991;333-48
- 23 Home Office. *Mentally Disordered Offenders: Inter-agency Working* (Circular 12/95). London: Home Office, 1995
- 24 James A. *Life on the Edge: Diversion and the Mentally Disordered Offender*. London: Mental Health Foundation, 1996
- 25 Joseph PLA, Potter M. Diversion from custody. I: Psychiatric assessment at the magistrates' court. *Br J Psychiatry* 1993;162:325-30
- 26 Daly R, Martin N, Staite K. Diversion from custody. *Forensic Update*, 1996;45:29-30
- 27 Hayes S. *People with an Intellectual Disability and the Criminal Justice System: Appearances Before the Local Courts*. New South Wales Law Reform Commission, Research Report 4. Sydney: New South Wales Law Reform Commission, 1993
- 28 Murphy G, Clare ICH. Capacity to make decisions affecting the person: psychologist's contribution. In: Bull R, Carson D eds. *Psychology in Legal Contexts*. Chichester: Wiley, 1995:97-128
- 29 Heal LW, Sigelman CK. Response biases in interviews of individuals with limited mental ability. *J Intellect Disabil Res* 1995;39:331-40
- 30 Clare ICH, Gudjonsson GH. Interrogative suggestibility, confabulation, and acquiescence in people with mild learning disabilities (mental handicap): Implications for reliability during police interview. *Br J Clin Psychol* 1993;32:295-301
- 31 Brown H, Egan-Sage E, Barry G, McKay C. *Towards Better Interviewing: A Handbook for Police Officers and Social Workers on the Sexual Abuse of Adults with Learning Disabilities*. Nottingham: NAPSAC, 1996
- 32 Home Office. *Police and Criminal Evidence Act 1984. Codes of practice*. Revised Edn. London: HMSO, 1995
- 33 Clare ICH, Gudjonsson GH. Recall and understanding of the caution and rights in police detention among persons of average intellectual ability and persons with a mental handicap. *Proceedings of the First DCLP Annual Conference*, Volume 1 (Issues in Criminological and Legal Psychology Series, No. 17). Leicester: British Psychological Society, 1991:34-42
- 34 Clare ICH, Gudjonsson GH, Harari PM. Understanding of the current police caution (England and Wales). *J Commun Appl Soc Psychol* (in press)
- 35 Gudjonsson GH, Clare ICH, Cross P. The revised PACE 'Notice to Detained Persons': how easy is it to read and understand? *J Forens Sci Soc* 1992;32:289-99
- 36 Clare ICH, Gudjonsson GH. *Devising and Piloting an Experimental Version of the 'Notice to Detained Persons'*. Royal Commission on Criminal Justice, Research Study No. 7. London: HMSO, 1992
- 37 Clare ICH, Gudjonsson GH. The vulnerability of suspects with intellectual disabilities during police interviews: a review and experimental study of decision-making. *Ment Handicap Res* 1995;8:110-28
- 38 Gudjonsson GH. *The Psychology of Interrogations, Confessions and Testimony*. Chichester: Wiley, 1992
- 39 Bean P, Nemitz R. *Out of Depth and Out of Sight*. London: Mencap, 1994
- 40 Brown D, Ellis T, Larcombe K. *Changing the Code: Police Detention under the Revised PACE Codes of Practice*. London: HMSO, 1992
- 41 Robertson G. Police interviewing and the use of Appropriate Adults. *J Forens Psychiatry* 1996;7:297-309
- 42 Pearse J, Gudjonsson GH. How appropriate are Appropriate Adults? *J Forens Psychiatry* 1996;7:570-80
- 43 Hollins S, Clare ICH, Murphy G, Webb B. *You're Under Arrest*. London: Royal College of Psychiatrists, 1996
- 44 Hollins S, Murphy G, Clare ICH, Webb B. *You're On Trial*. London: Royal College of Psychiatrists, 1996
- 45 Department of Health. *Building Bridges*. London: HMSO, 1995
- 46 Davison FM, Clare ICH, Georgiades S, Divall J, Holland AJ. Treatment of a man with mild learning disabilities who was sexually assaulted whilst in prison. *Med Sci Law* 1994;34:346-53
- 47 Stenfort Kroese B, Dagnan D, Loumidis K, eds. *Cognitive Behaviour Therapy for People with Learning Disabilities*. London: Routledge, 1997
- 48 Clare ICH, Murphy G. Working with offenders or alleged offenders with intellectual disabilities. In: Emerson E, Caine A, Bromley J, Hatton C, eds. *Clinical Psychology and People with Intellectual Disabilities*. Chichester: Wiley (in press)
- 49 Murphy G, Clare ICH. MIETS A service option for people with mild mental handicaps and challenging behaviour or psychiatric problems. 2. Assessment, treatment and outcome for service users and service effectiveness. *Ment Handicap Res*, 1991;4:180-206
- 50 Day K. A hospital-based treatment programme for male mentally handicapped offenders. *Br J Psychiatry*, 1988;153:635-44
- 51 Murphy G, Estien D, Clare ICH. Services for people with mild learning disabilities and challenging behaviour. *J Appl Res Intellect Disabil* 1996;3:256-83
- 52 Sansom D, Cumella S. One hundred admissions to a regional secure unit for people with a learning disability. *J Forens Psychiatry* 1995;6:267-76